

APPENDIX E PALESTINIAN MICS 2019-2020 QUESTIONNAIRES

The questionnaires of the Palestine MICS are presented in Appendix E:

- Household questionnaire
- Water Quality Testing Questionnaire
- Questionnaire for Individual Women
- Questionnaire for Children Under Five
- Questionnaire for Children Age 5-17



HOUSEHOLD INFORMATION PANEL **HH**

HH1. Cluster number: _____		HH2. Household number: _____	
HH3. Interviewer's name and number: NAME _____		HH4. Supervisor's name and number: NAME _____	
HH5. Day / Month / Year of interview: _____ / _____ / <u>20</u> _____		HH7. GOVERNORATE name and code: Name _____	
HH6. AREA:	URBAN..... 1 RURAL..... 2 CAMP..... 3		
HH9. Is the household selected for Water Quality Testing?	Yes..... 1 No..... 2	HH10. Is the household selected for blank testing?	Yes..... 1 No..... 2

<p><i>Check that the respondent is a knowledgeable member of the household and at least 18 years old before proceeding. You may only interview a child age 15-17 if there is no adult member of the household or all adult members are incapacitated. You may not interview a child under age 15.</i></p>	<p>HH11. Record the time. HOURS : MINUTES ____ : ____</p>
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HH12. Hello, my name is (**your name**). We are from Palestinian Central Bureau of Statistics. We are conducting a survey about the situation of children, families and households. I would like to talk to you about these subjects. This interview usually takes about **30** minutes. Following this, I may ask to conduct additional interviews with you or other individual members of your household. All the information we obtain will remain strictly confidential and anonymous. If you do not wish to answer a question or stop the interview, please let me know. May I start now?

YES..... 1	1 ⇨ LIST OF HOUSEHOLD MEMBERS 2 ⇨ HH46
NO / NOT ASKED..... 2	

HH46. Result of Household Questionnaire interview:	COMPLETED.....01
<i>Discuss any result not completed with Supervisor.</i>	NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT.....02
	ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME.....03
	REFUSED.....04
	DWELLING VACANT OR ADDRESS NOT A DWELLING.....05
	DWELLING DESTROYED.....06
	DWELLING NOT FOUND.....07
	OTHER (specify)..... 96

HH47. Name and line number of the respondent to Household Questionnaire interview:
NAME _____

HOUSEHOLD MEMBERS
WOMEN AGE 15-49
CHILDREN UNDER AGE 5
CHILDREN AGE 5-17

To be filled after the Household Questionnaire is completed

TOTAL NUMBER	
HH48	_____
HH49	_____
HH51	_____
HH52	_____

To be filled after all the questionnaires are completed

COMPLETED NUMBER	
HH53	_____
HH55	_____
HH56	ZERO.. 0 ONE.... 1

LIST OF HOUSEHOLD MEMBERS

HL

First complete HL2-HL4 vertically for all household members, starting with the head of the household. Once HL2-HL4 are complete for all members, make sure to probe for additional members: Those that are not currently at home, any infants or small children and any others who may not be family (such as servants, friends) but who usually live in the household. Then, ask questions HL4A-HL20 for each member one at a time. If additional questionnaires are used, indicate by ticking this box:

HL1. Line number	HL2. First, please tell me the name of each person who usually lives here, starting with the head of the household. Probe for additional household members.	HL3. What is the relationship of (name) to (name of the head of household)?	HL4. Is (name) male or female? 1 MALE 2 FEMALE	HL4A. Refugee Status? 1 REGISTERED REFUGEE 2 NON-REGISTERED REFUGEE 3 NON-REFUGEE	HL5. What is (name)'s date of birth? 98 DK 9998 DK	HL6. How old is (name)? Record in completed years. If age is 95 or above, record '95'.	HL8. Record line number if woman and age 15-49.	HL10. Record line number if age 0-4.	HL11. Age 0-17? 1 YES 2 NO ∇ Next Line	HL12. Is (name)'s natural mother alive? 1 YES 2 NO ∇ HL16 8 DK ∇ HL16	HL13. Does (name)'s natural mother live in this household? 1 YES 2 NO ∇ HL15	HL14. Record the line number of mother and go to HL16.	HL15. Where does (name)'s natural mother live? 1 ABROAD 2 IN ANOTHER HOUSEHOLD IN THE SAME GOVERNORATE 3 IN ANOTHER HOUSEHOLD IN ANOTHER GOVERNORATE 4 INSTITUTION IN THIS COUNTRY 8DK	HL16. Is (name)'s natural father alive? 1 YES 2 NO ∇ HL20 8 DK ∇ HL20	HL17. Does (name)'s natural father live in this household? 1 YES 2 NO ∇ HL19	HL18. Record the line number of father and go to HL20.	HL19. Where does (name)'s natural father live? 1 ABROAD 2 IN ANOTHER HOUSEHOLD IN THE SAME GOVERNORATE 3 IN ANOTHER HOUSEHOLD IN ANOTHER GOVERNORATE 4 INSTITUTION IN THIS COUNTRY 8DK	HL20. Copy the line number of mother from HL14. If blank, ask: Who is the primary caretaker of (name)? If 'No one' for a child age 15-17, record '90'.	
LINE	NAME	RELATION*	M F		MONTH	YEAR	AGE	W 15-49	0-4	Y N	Y N DK	Y N	MOTHER	Y N DK	Y N	FATHER			
01		0 1	1 2	1 2 3	___	_____	___	01	01	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
02		___	1 2	1 2 3	___	_____	___	02	02	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
03		___	1 2	1 2 3	___	_____	___	03	03	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
04		___	1 2	1 2 3	___	_____	___	04	04	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
05		___	1 2	1 2 3	___	_____	___	05	05	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
06		___	1 2	1 2 3	___	_____	___	06	06	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
07		___	1 2	1 2 3	___	_____	___	07	07	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
08		___	1 2	1 2 3	___	_____	___	08	08	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
09		___	1 2	1 2 3	___	_____	___	09	09	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
10		___	1 2	1 2 3	___	_____	___	10	10	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
11		___	1 2	1 2 3	___	_____	___	11	11	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
12		___	1 2	1 2 3	___	_____	___	12	12	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
13		___	1 2	1 2 3	___	_____	___	13	13	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
14		___	1 2	1 2 3	___	_____	___	14	14	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
15		___	1 2	1 2 3	___	_____	___	15	15	1 2	1 2 8	1 2	___	1 2 3 4 8	1 2 8	1 2	___	1 2 3 4 8	___
* Codes for HL3: Relationship to head of household:			01 HEAD 02 SPOUSE 03 SON / DAUGHTER 04 SON-IN-LAW / DAUGHTER-IN-LAW				05 GRANDCHILD 06 PARENT 07 PARENT-IN-LAW 08 BROTHER / SISTER				09 BROTHER-IN-LAW / SISTER-IN-LAW 10 UNCLE/AUNT 11 NIECE / NEPHEW 12 OTHER RELATIVE				13 ADOPTED / FOSTER / STEPCHILD 14 SERVANT (LIVE-IN) 96 OTHER (NOT RELATED) 98 DK				

EDUCATION 1												ED										
ED1. Line number	ED2. Name and age. Copy names and ages of <u>all</u> members of the household from HL2 and HL6 to below <u>and</u> to next page of the module.		ED3. Age 3 or above? 1 YES 2 NO ☺ Next Line		ED4. Has (name) ever attended school or any Kindergarten programme? 1 YES 2 NO ☺ Next Line		ED5. What is the highest level and grade or year of school (name) has ever <u>attended</u> ? LEVEL: 0 KINDERGARTEN ☺ 1 BASIC 2 SECONDARY 3 HIGHER 8 DK GRADE/YEAR: 98 DK ☺ ED7					ED6. Did (name) ever <u>complete</u> that (grade/year)? 1 YES 2 NO 8 DK			ED7. Age 3-24? 1 YES 2 NO ☺ Next Line		ED8. Check ED4: Ever attended school or kindergarten? 1 YES 2 NO ☺ Next Line					
LINE	NAME	AGE	YES	NO	YES	NO	LEVEL					GRADE/YEAR			Y	N	DK	YES	NO	YES	NO	
01		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
02		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
03		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
04		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
05		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
06		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
07		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
08		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
09		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
10		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
11		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
12		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
13		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
14		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2
15		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	1	2

ED1. Line number	ED2. Name and age.		ED9. At any time during the 2019/2020 school year did (<i>name</i>) attend school or any Kindergarten programme? 1 YES 2 NO ∅ ED15	ED10. During this 2019/2020 school year, which level and grade or year is (<i>name</i>) attending?		ED11. Is (he/she) attending a public school? If "Yes", record '1'. If "No", probe to code who controls and manages the school. 1 GOVERNMENT 2 UNRWA 3 PRIVATE 6 OTHER 8 DK	ED12. In the 2019/2020 school year, has (<i>name</i>) received any school tuition support? If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours. 1 YES 2 NO ∅ 8 DK ∅ ED14	ED13. Who provided the tuition support? Record all mentioned. A GOVERNMENT B UNRWA C PRIVATE X OTHER Z DK	ED14. For the 2019/2020 school year, has (<i>name</i>) received any material support or cash to buy shoes, exercise books, notebooks, school uniforms or other school supplies? If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours. 1 YES 2 NO 8 DK	ED15. At any time during the 2018/2019 school year did (<i>name</i>) attend school or any Kindergarten programme? 1 YES 2 NO ∅ 8 DK ∅ Next Line	ED16. During 2018/2019 school year, which level and grade or year did (<i>name</i>) attend?	
				LEVEL: 0 KINDER-GARTEN ∅ ED15 1 BASIC 2 SECONDARY 3 HIGHER 8 DK	GRADE/YEAR: 98 DK						LEVEL: 0 KINDER-GARTEN ∅ Next Line 1 BASIC 2 SECONDARY 3 HIGHER 8 DK	GRADE/YEAR: 98 DK
LINE	NAME	AGE	YES NO	LEVEL	GRADE/YEAR	AUTHORITY	YES NO DK	TUITION	YES NO DK	YES NO DK	LEVEL	GRADE/YEAR
01		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
02		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
03		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
04		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
05		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
06		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
07		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
08		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
09		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
10		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
11		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
12		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
13		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
14		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____
15		_____	1 2	0 1 2 3 8	_____	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	_____

HOUSEHOLD CHARACTERISTICS

HC

<p>HC0. What kind of dwelling unit does the household live in?</p> <p><i>Record observation.</i></p>	<p>VILLA..... 11 HOUSE 12 APARTMENT..... 13 SEPARATE ROOM 14 TENT 15 MARGINAL “BARRAKEYAH” 16 OTHER (<i>specify</i>) _____ 96</p>	
<p>HC3. How many rooms do members of this household usually use for sleeping?</p>	<p>NUMBER OF ROOMS.....__ __</p>	
<p>HC4. Main material of the dwelling floor.</p> <p><i>Record observation.</i></p> <p><i>If observation is not possible, ask the respondent to determine the material of the dwelling floor.</i></p>	<p>NATURAL FLOOR EARTH / SAND 11 FINISHED FLOOR PARQUET OR POLISHED WOOD..... 31 VINYL OR ASPHALT STRIPS 32 CERAMIC TILES..... 33 CEMENT..... 34 CARPET..... 35 TILES (BALADY) 36 OTHER (<i>specify</i>) _____ 96</p>	

<p>HC5. Main material of the roof.</p> <p><i>Record observation.</i></p>	<p>NO ROOF 11</p> <p>NATURAL ROOFING</p> <p>THATCH / PALM LEAF..... 12</p> <p>FINISHED ROOFING</p> <p>METAL / TIN..... 31</p> <p>WOOD 32</p> <p>CALAMINE / CEMENT FIBRE 33</p> <p>CEMENT..... 35</p> <p>OTHER (<i>specify</i>) _____ 96</p>	
<p>HC6. Main material of the exterior walls.</p> <p><i>Record observation.</i></p>	<p>NO WALLS 11</p> <p>NATURAL WALLS</p> <p>DIRT 13</p> <p>RUDIMENTARY WALLS</p> <p>STONE WITH MUD 22</p> <p>FINISHED WALLS</p> <p>CEMENT..... 31</p> <p>STONE WITH LIME / CEMENT 32</p> <p>BRICKS..... 33</p> <p>COVERED ADOBE 35</p> <p>OTHER (<i>specify</i>) _____ 96</p>	

HC7. Does your household have:	YES	NO	
[A] A fixed telephone line?	FIXED TELEPHONE LINE 1	2	
[B] A radio?	RADIO 1	2	
[C] Dining Room Sets?	DINING ROOM SETS 1	2	
[D] Kitchen Cabinets?	KITCHEN CABINETS 1	2	
[E] Solar heater?	SOLAR HEATER 1	2	
HC8. Does your household have electricity?	YES, INTERCONNECTED GRID 1		
	YES, OFF-GRID (GENERATOR/ISOLATED SYSTEM) 2		
	NO 3		3 ⇒ HC10
HC9. Does your household have:	YES	NO	
[A] A television?	TELEVISION 1	2	
[B] A refrigerator?	REFRIGERATOR 1	2	
[C] LCD /LED /3D TV?	LCD /LED /3D TV 1	2	
[D] Central heating?	CENTRAL HEATING 1	2	
[E] Clothes dryer ?	CLOTHES DRYER 1	2	
[F] Freezer?	FREEZER 1	2	
[G] Dish washer?	DISHWASHER 1	2	
[H] Air condition?	AIR CONDITION 1	2	
[I] Satellite dish?	SATELLITE DISH 1	2	
[J] Vacuum cleaner?	VACUUM CLEANER 1	2	
[K] Clothes washer?	CLOTHES WASHER 1	2	

HC10. Does any member of your household own:	YES NO	
[C] A motorcycle?	MOTORCYCLE.....1 2	
[E] A car, truck or van?	CAR / TRUCK / VAN.....1 2	
[F] A boat with a motor?	BOAT WITH MOTOR1 2	
[G] Play station/ xbox?	PLAY STATION/ XBOX 1 2	
[H] Auto rickshaw (Tok Tok)?	Auto rickshaw (Tok Tok)..... 1 2	
[I] An electric bicycle?	ELECTRIC BICYCLE.....1 2	
HC11. Does any member of your household have a computer, laptop or a tablet?	YES..... 1 NO 2	
HC12. Does any member of your household have a mobile phone?	YES..... 1 NO 2	
HC13. Does your household have access to internet at home?	YES..... 1 NO 2	
<p>HC14. Do you or someone living in this household own this dwelling?</p> <p><i>If 'No', then ask: Do you rent this dwelling from someone not living in this household?</i></p> <p><i>If 'Rented from someone else', record '2'. For other responses, record '6' and specify.</i></p>	OWN..... 1 RENT 2 OTHER (<i>specify</i>) _____ 6	
HC15. Does any member of this household own any land that can be used for agriculture?	YES..... 1 NO 2	2⇒HC17
<p>HC16. How many donum of agricultural land do members of this household own?</p> <p><i>If less than 1, record '00'.</i></p>	DONUM..... ____ 95 OR MORE 95 DK 98	
HC17. Does this household own any livestock, herds, other farm animals, or poultry?	YES..... 1 NO 2	2⇒HC19

<p>HC18. How many of the following animals does this household have?</p> <p>[A] Milk cows or bulls?</p> <p>[B] Other cattle?</p> <p>[C] Horses, donkeys or mules?</p> <p>[D] Goats?</p> <p>[E] Sheep?</p> <p>[F] Chickens?</p> <p>[H] Camels?</p> <p><i>If none, record '00'. If 95 or more, record '95'. If unknown, record '98'.</i></p>	<p>MILK COWS OR BULLS__ __</p> <p>OTHER CATTLE.....__ __</p> <p>HORSES, DONKEYS OR MULES__ __</p> <p>GOATS__ __</p> <p>SHEEP__ __</p> <p>CHICKENS.....__ __</p> <p>CAMELS.....__ __</p>	
<p>HC19. Does any member of this household have a bank account?</p>	<p>YES..... 1</p> <p>NO 2</p>	

SOCIAL TRANSFERS

ST

ST1. I would like to ask you about various external economic assistance programmes provided to households. By external assistance I mean support that comes from the government or from non-governmental organizations such as religious, charitable, or community-based organizations. This excludes support from family, other relatives, friends or neighbours.

	[A] CASH ASSISTANCE PROGRAM	[B] ECONOMIC EMPOWERMENT PROGRAM	[C] ORPHAN SPONSORSHIP PROGRAM	[D] ANY RETIREMENT PENSION	[X] ANY OTHER EXTERNAL ASSISTANCE PROGRAMME
ST2. Are you aware of (<i>name of programme</i>)?	YES.....1 ☺ ST3	YES 1 ☺ ST3	YES..... 1 ☺ ST3	YES 1 ☺ ST3	YES (<i>specify</i>)..... 1 ☺ ST3
	NO 2 ☺ [B]	NO 2 ☺ [C]	NO 2 ☺ [D]	NO 2 ☺ [X]	NO..... 2 ☺ End
ST3. Has your household or anyone in your household received assistance through (<i>name of programme</i>)?	YES..... 1 ☺ ST4	YES 1 ☺ ST4	YES..... 1 ☺ ST4	YES 1 ☺ ST4	YES 1 ☺ ST4
	NO 2 ☺ [B]	NO 2 ☺ [C]	NO 2 ☺ [D]	NO 2 ☺ [X]	NO..... 2 ☺ End
	DK 8 ☺ [B]	DK 8 ☺ [C]	DK 8 ☺ [D]	DK 8 ☺ [X]	DK..... 8 ☺ End
ST4. When was the <u>last time</u> your household or anyone in your household received assistance through (<i>name of programme</i>)?	MONTHS AGO... 1 ___ ☺ [B]	MONTHS AGO ...1 ___ ☺ [C]	MONTHS AGO... 1 ___ ☺ [D]	MONTHS AGO .. 1 ___ ☺ [X]	MONTHS AGO ...1 ___ ☺ End
	YEARS AGO 2 ___ ☺ [B]	YEARS AGO 2 ___ ☺ [C]	YEARS AGO 2 ___ ☺ [D]	YEARS AGO 2 ___ ☺ [X]	YEARS AGO 2 ___ ☺ End
<i>If less than one month, record '1' and record '00' in Months.</i>	DK 998 ☺ [B]	DK 998 ☺ [C]	DK 998 ☺ [D]	DK 998 ☺ [X]	DK 998 ☺ End
<i>If less than 12 months, record '1' and record in Months.</i>					
<i>If 1 year/12 months or more, record '2' and record in Years.</i>					

HOUSEHOLD ENERGY USE		EU
EU1. In your household, what type of cook stove is <u>mainly</u> used for <u>cooking</u> ?	ELECTRIC STOVE.....01	01 ⇒EU5
	LIQUEFIED PETROLEUM GAS (LPG)/ COOKING GAS STOVE03	03 ⇒EU5
	LIQUID FUEL STOVE.....06	
	THREE STONE STOVE / OPEN FIRE.....09	
	OTHER (<i>specify</i>) _____ 96	
	NO FOOD COOKED IN HOUSEHOLD97	97 ⇒EU6
EU4. What type of fuel or energy source is used in this cook stove? <i>If more than one, record the main energy source for this cook stove.</i>	GASOLINE / DIESEL02	
	KEROSENE03	
	CHARCOAL05	
	WOOD06	
	CROP RESIDUE / GRASS / STRAW / SHRUBS.....07	
	SAWDUST11	
	OTHER (<i>specify</i>) _____ 96	
EU5. Is the cooking usually done in the house, in a separate building, or outdoors? <i>If in main house, probe to determine if cooking is done in a separate room.</i> <i>If outdoors, probe to determine if cooking is done on veranda, covered porch, or open air.</i>	IN MAIN HOUSE NO SEPARATE ROOM..... 1 IN A SEPARATE ROOM 2	
	IN A SEPARATE BUILDING 3	
	OUTDOORS OPEN AIR 4 ON VERANDA OR COVERED PORCH..... 5	
	OTHER (<i>specify</i>) _____ 6	
EU6. What does your household <u>mainly</u> use for <u>space heating</u> when needed?	CENTRAL HEATING01	01 ⇒EU8
	MANUFACTURED SPACE HEATER02	
	THREE STONE STOVE / OPEN FIRE.....06	06 ⇒EU8
	OTHER (<i>specify</i>) _____ 96	96 ⇒EU8
	NO SPACE HEATING IN HOUSEHOLD97	97 ⇒EU9
EU7. Does it have a chimney?	YES 1	
	NO..... 2	
	DK..... 8	

<p>EU8. What type of fuel and energy source is used in this heater?</p> <p><i>If more than one, record the main energy source for this heater.</i></p>	<p>ELECTRICITY02</p> <p>GAS.....04</p> <p>GASOLINE / DIESEL07</p> <p>KEROSENE08</p> <p>CHARCOAL10</p> <p>WOOD11</p> <p>CROP RESIDUE / GRASS / STRAW / SHRUBS.....12</p> <p>SAWDUST16</p> <p>OTHER (<i>specify</i>) _____ 96</p> <p>DK.....98</p>	
<p>EU9. At night, what does your household <u>mainly</u> use to <u>light</u> the household?</p>	<p>ELECTRICITY01</p> <p>SOLAR LANTERN02</p> <p>RECHARGEABLE FLASHLIGHT, TORCH OR LANTERN03</p> <p>BATTERY POWERED FLASHLIGHT, TORCH OR LANTERN04</p> <p>KEROSENE LAMP07</p> <p>CANDLE13</p> <p>OTHER (<i>specify</i>) _____ 96</p> <p>NO LIGHTING IN HOUSEHOLD.....97</p>	

WATER AND SANITATION

WS

WS1. What is the main source of drinking water used by members of your household?

If unclear, probe to identify the place from which members of this household most often collect drinking water (collection point).

PIPED WATER		
PIPED INTO DWELLING	11	11 ⇨WS7
PIPED TO YARD / PLOT	12	12 ⇨WS7
PIPED TO NEIGHBOUR	13	13 ⇨WS3
PUBLIC TAP / STANDPIPE	14	14 ⇨WS3
TUBE WELL / BOREHOLE	21	21 ⇨WS3
DUG WELL		
PROTECTED WELL	31	31 ⇨WS3
UNPROTECTED WELL	32	32 ⇨WS3
SPRING		
PROTECTED SPRING.....	41	41 ⇨WS3
UNPROTECTED SPRING	42	42 ⇨WS3
RAINWATER.....	51	51 ⇨WS3
TANKER-TRUCK	61	61 ⇨WS4
CART WITH SMALL TANK	71	71 ⇨WS4
WATER KIOSK.....	72	72 ⇨WS4
SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL)	81	81 ⇨WS3
PACKAGED WATER		
BOTTLED WATER.....	91	
20 LITER WATER BOTTLES	93	
		96 ⇨WS3
OTHER (<i>specify</i>).....	96	

WS2. What is the main source of water used by members of your household for other purposes such as cooking and handwashing?

If unclear, probe to identify the place from which members of this household most often collect water for other purposes.

PIPED WATER		
PIPED INTO DWELLING	11	11 ⇨WS7
PIPED TO YARD / PLOT	12	12 ⇨WS7
PIPED TO NEIGHBOUR	13	
PUBLIC TAP / STANDPIPE	14	
TUBE WELL / BOREHOLE	21	
DUG WELL		
PROTECTED WELL	31	
UNPROTECTED WELL	32	
SPRING		
PROTECTED SPRING.....	41	
UNPROTECTED SPRING	42	
RAINWATER.....	51	
TANKER-TRUCK	61	61 ⇨WS4
CART WITH SMALL TANK	71	71 ⇨WS4
WATER KIOSK.....	72	72 ⇨WS4
SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL)	81	
OTHER (<i>specify</i>).....	96	

WS3. Where is that water source located?	IN OWN DWELLING..... 1 IN OWN YARD / PLOT 2 ELSEWHERE 3	1 ⇨WS7 2 ⇨WS7
WS4. How long does it take for members of your household to go there, get water, and come back?	MEMBERS DO NOT COLLECT 000 NUMBER OF MINUTES..... _ _ _ DK 998	000 ⇨WS7
WS5. Who usually goes to this source to collect the water for your household? <i>Record the name of the person and copy the line number of this person from the LIST OF HOUSEHOLD MEMBERS Module.</i>	NAME _____ LINE NUMBER..... _ _	
WS6. Since last (<i>day of the week</i>), how many times has this person collected water?	NUMBER OF TIMES _ _ DK 98	
WS7. In the last month, has there been any time when your household did not have sufficient quantities of drinking water?	YES, AT LEAST ONCE 1 NO, ALWAYS SUFFICIENT..... 2 DK 8	2 ⇨WS9 8 ⇨WS9
WS8. What was the main reason that you were unable to access water in sufficient quantities when needed?	WATER NOT AVAILABLE FROM SOURCE ... 1 WATER TOO EXPENSIVE..... 2 SOURCE NOT ACCESSIBLE 3 OTHER (<i>specify</i>)..... 6 DK 8	
WS9. Do you or any other member of this household do anything to the water to make it safer to drink?	YES 1 NO 2 DK 8	2 ⇨WS11 8 ⇨WS11
WS10. What do you usually do to make the water safer to drink? <i>Probe:</i> Anything else? <i>Record all methods mentioned.</i>	BOIL..... A ADD BLEACH / CHLORINE B STRAIN IT THROUGH A CLOTH..... C USE WATER FILTER (CERAMIC, SAND, COMPOSITE, ETC.) D LET IT STAND AND SETTLE..... F OTHER (<i>specify</i>)..... X DK Z	
WS11. What kind of toilet facility do members of your household usually use? <i>If 'Flush' or 'Pour flush', probe:</i> Where does it flush to? <i>If not possible to determine, ask permission to observe the facility.</i>	FLUSH / POUR FLUSH FLUSH TO PIPED SEWER PUPLIC SYSTEM..... 11 FLUSH TO SEPTIC TANK..... 12 FLUSH TO PIT LATRINE..... 13 FLUSH TO OPEN DRAIN 14 FLUSH TO DK WHERE 18 NO FACILITY / BUSH / FIELD 95 OTHER (<i>specify</i>)..... 96	11 ⇨WS14 14 ⇨WS14 18 ⇨WS14 95 ⇨End 96 ⇨WS14

<p>WS12. Has your (<i>answer from WS11</i>) ever been emptied?</p>	<p>YES, EMPTIED 1 NO, NEVER EMPTIED 4 DK 8</p>	<p>4 ⇒ WS14 8 ⇒ WS14</p>
<p>WS13. The last time it was emptied, where were the contents emptied to?</p> <p><i>Probe:</i> Was it removed by a service provider?</p>	<p>REMOVED BY SERVICE PROVIDER TO A TREATMENT PLANT 1 BURIED IN A COVERED PIT..... 2 TO DON'T KNOW WHERE 3</p> <p>EMPTIED BY HOUSEHOLD BURIED IN A COVERED PIT..... 4 TO UNCOVERED PIT, OPEN GROUND, WATER BODY OR ELSEWHERE..... 5</p> <p>OTHER (<i>specify</i>) 6</p> <p>DK 8</p>	
<p>WS14. Where is this toilet facility located?</p>	<p>IN OWN DWELLING..... 1 IN OWN YARD / PLOT 2 ELSEWHERE 3</p>	
<p>WS15. Do you share this facility with others who are not members of your household?</p>	<p>YES 1 NO 2</p>	<p>2 ⇒ End</p>
<p>WS16. Do you share this facility only with members of other households that you know, or is the facility open to the use of the general public?</p>	<p>SHARED WITH KNOWN HOUSEHOLDS (NOT PUBLIC) 1 SHARED WITH GENERAL PUBLIC..... 2</p>	<p>2 ⇒ End</p>
<p>WS17. How many households in total use this toilet facility, including your own household?</p>	<p>NUMBER OF HOUSEHOLDS (IF LESS THAN 10)..... <u>0</u> ____</p> <p>TEN OR MORE HOUSEHOLDS 10</p> <p>DK 98</p>	

HANDWASHING		HW
<p>HW1. We would like to learn about where members of this household wash their hands.</p> <p>Can you please show me where members of your household <u>most often</u> wash their hands?</p> <p><i>Record result and observation.</i></p>	<p>OBSERVED</p> <p>FIXED FACILITY OBSERVED (SINK / TAP)</p> <p>IN DWELLING 1</p> <p>IN YARD /PLOT 2</p> <p>MOBILE OBJECT OBSERVED</p> <p>(BUCKET / JUG / KETTLE) 3</p> <p>NOT OBSERVED</p> <p>NO HANDWASHING PLACE IN DWELLING /</p> <p>YARD / PLOT 4</p> <p>NO PERMISSION TO SEE 5</p> <p>OTHER REASON (<i>specify</i>) 6</p>	<p>4 ⇨HW5</p> <p>5 ⇨HW4</p> <p>6 ⇨HW5</p>
<p>HW2. Observe presence of water at the place for handwashing.</p> <p><i>Verify by checking the tap/pump, or basin, bucket, water container or similar objects for presence of water.</i></p>	<p>WATER IS AVAILABLE..... 1</p> <p>WATER IS NOT AVAILABLE..... 2</p>	
<p>HW3. Is soap or detergent or ash/mud/sand present at the place for handwashing?</p>	<p>YES, PRESENT..... 1</p> <p>NO, NOT PRESENT 2</p>	<p>1 ⇨HW7</p> <p>2 ⇨HW5</p>
<p>HW4. Where do you or other members of your household <u>most often</u> wash your hands?</p>	<p>FIXED FACILITY (SINK / TAP)</p> <p>IN DWELLING 1</p> <p>IN YARD / PLOT 2</p> <p>MOBILE OBJECT</p> <p>(BUCKET / JUG / KETTLE) 3</p> <p>NO HANDWASHING PLACE IN</p> <p>DWELLING / YARD / PLOT 4</p> <p>OTHER (<i>specify</i>) 6</p>	
<p>HW5. Do you have any soap or detergent or ash/mud/sand in your house for washing hands?</p>	<p>YES..... 1</p> <p>NO..... 2</p>	<p>2 ⇨End</p>
<p>HW6. Can you please show it to me?</p>	<p>YES, SHOWN 1</p> <p>NO, NOT SHOWN 2</p>	<p>2 ⇨End</p>
<p>HW7. Record your observation.</p> <p><i>Record all that apply.</i></p>	<p>BAR OR LIQUID SOAP A</p> <p>DETERGENT (POWDER / LIQUID / PASTE)..... B</p> <p>ASH / MUD / SAND C</p>	

SALT IODISATION

SA

<p>SA1. We would like to check whether the salt used in your household is iodised. May I have a sample of the salt used <u>to cook meals</u> in your household?</p> <p><i>Apply 2 drops of test solution, observe the darkest reaction within 30 seconds, compare to the colour chart and then record the result (1, 2 or 3) that corresponds to test outcome.</i></p>	<p>SALT TESTED 0 PPM (NO REACTION).....1 BELOW 15 PPM (BETWEEN 0 AND 15 PPM)...2 ABOVE 15 PPM (AT LEAST 15 PPM).....3</p> <p>SALT NOT TESTED NO SALT IN THE HOUSE.....4 OTHER REASON (specify) _____ 6</p>	<p>2 ⇨ HH13 3 ⇨ HH13 4 ⇨ HH13 6 ⇨ HH13</p>
<p>SA2. I would like to perform one more test. May I have another sample of the same salt?</p> <p><i>Apply 5 drops of recheck solution. Then apply 2 drops of test solution on the same spot. Observe the darkest reaction within 30 seconds, compare to the colour chart and then record the result (1, 2 or 3) that corresponds to test outcome.</i></p>	<p>SALT TESTED 0 PPM (NO REACTION).....1 BELOW 15 PPM (BETWEEN 0 AND 15 PPM)...2 ABOVE 15 PPM (AT LEAST 15 PPM).....3</p> <p>SALT NOT TESTED OTHER REASON (specify) _____ 6</p>	

<p>HH13. Record the time.</p>	<p>HOUR AND MINUTES : ..</p>	
<p>HH18. Check HL6 in the LIST OF HOUSEHOLD MEMBERS and indicate the total number of children age 5-17 years:</p>	<p>NO CHILDREN..... 0 1 CHILD..... 1 2 OR MORE CHILDREN (NUMBER) _</p>	<p>0 ⇨ HH29 1 ⇨ HH27</p>

HH19. List each of the children age 5-17 years below in the order they appear in the LIST OF HOUSEHOLD MEMBERS. Do not include other household members outside of the age range 5-17 years. Record the line number, name, sex, and age for each child.

HH20. Rank number	HH21. Line number from HL1	HH22. Name from HL2	HH23. Sex from HL4		HH24. Age from HL6
RANK	LINE	NAME	M	F	AGE
1	___		1	2	___
2	___		1	2	___
3	___		1	2	___
4	___		1	2	___
5	___		1	2	___
6	___		1	2	___
7	___		1	2	___
8	___		1	2	___

○

HH25. Check the last digit of the household number (HH2) from the HOUSEHOLD INFORMATION PANEL. This is the number of the row you should go to in the table below.

Check the total number of children age 5-17 years in HH18 above. This is the number of the column you should go to in the table below.

Find the box where the row and the column meet and record the number that appears in the box. This is the rank number (HH20) of the selected child.

LAST DIGIT OF HOUSEHOLD NUMBER (FROM HH2)	TOTAL NUMBER OF ELIGIBLE CHILDREN IN THE HOUSEHOLD (FROM HH18)						
	2	3	4	5	6	7	8+
0	2	2	4	3	6	5	4
1	1	3	1	4	1	6	5
2	2	1	2	5	2	7	6
3	1	2	3	1	3	1	7
4	2	3	4	2	4	2	8
5	1	1	1	3	5	3	1
6	2	2	2	4	6	4	2
7	1	3	3	5	1	5	3
8	2	1	4	1	2	6	4
9	1	2	1	2	3	7	5

HH26. Record the rank number (HH20), line number (HH21), name (HH22) and age (HH24) of the selected child.

RANK NUMBER _ _

HH27. (When HH18=1 or when there is a single child age 5-17 in the household): Record the rank number as '1' and record the line number (HL1), the name (HL2) and age (HL6) of this child from the LIST OF HOUSEHOLD MEMBERS.

LINE NUMBER..... _ _

NAME

AGE..... _ _

HH28. Issue a QUESTIONNAIRE FOR CHILDREN AGE 5-17 to be administered to the mother/caretaker of this child.

HH29. Check HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any women age 15-49?

YES, AT LEAST ONE WOMAN AGE 15-49..... 1
NO..... 2

2 ⇒ HH40

HH30. Issue a separate QUESTIONNAIRE FOR INDIVIDUAL WOMEN for each woman age 15-49 years.

HH31. Check HL6 and HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any girls age 15-17?

YES, AT LEAST ONE GIRL AGE 15-17 1
NO..... 2

2 ⇒ HH40

HH32. Check HL20 in the LIST OF HOUSEHOLD MEMBERS: Is consent required for interviewing at least one girl age 15-17?

YES, AT LEAST ONE GIRL AGE 15-17 WITH HL20≠90..... 1
NO, HL20=90 FOR ALL GIRLS AGE 15-17..... 2

2 ⇒ HH40

HH33. As part of the survey we are also interviewing women age 15-49. We ask each person we interview for permission. A female interviewer conducts these interviews.

For girls age 15-17 we must also get permission from an adult to interview them. As mentioned before, all the information we obtain will remain strictly confidential and anonymous.

May we interview (*name(s) of female member(s) age 15-17*) later?

- 'Yes' for all girls age 15-17 ⇒ Continue HH40.
- 'No' for at least one girl age 15-17 and 'Yes' to at least one girl age 15-17 ⇒ Record '06' in WM17 (also in UF17 and FS17, if applicable) on individual questionnaires for those adult consent was not given. Then continue with HH40.
- 'No' for all girls age 15-17 ⇒ Record '06' in WM17 (also in UF17 and FS17, if applicable) on all individual questionnaires for whom adult consent was not given. Then continue with HH40.

HH40. Check HL10 in the LIST OF HOUSEHOLD MEMBERS: Are there any children age 0-4?	YES, AT LEAST ONE.....	1	2 ⇒ HH42
	NO.....	2	

HH41. Issue a separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE for each child age 0-4 years.

HH42. CHECK HH9 IN THE HOUSEHOLD INFORMATION PANEL: IS THE HOUSEHOLD SELECTED FOR WATER QUALITY TESTING QUESTIONNAIRE?	YES, HH9=1.....	1	2 ⇒ HH45
	NO, HH9=2.....	2	

HH43. Issue a separate WATER QUALITY TESTING QUESTIONNAIRE for this household

HH44. As part of the survey we are also looking at the quality of drinking water. We would like to do a simple test of your drinking water. A colleague will come and collect the water samples. May we do such a test? <i>If the respondent requests to learn the results, explain that results will not be shared with individual households but will be made available to local authorities.</i>	YES, PERMISSION IS GIVEN.....	1	2 ⇒ Record '02' in WQ31 on the WATER QUALITY TESTING QUESTIONNAIRE
	NO, PERMISSION IS NOT GIVEN.....	2	

HH45. Now return to the HOUSEHOLD INFORMATION PANEL and,

- Record '01' in question HH46 (Result of the Household Questionnaire interview),
- Record the name and the line number (from the LIST OF HOUSEHOLD MEMBERS) of the Respondent to the Household Questionnaire interview in HH47,
- Fill the questions HH48 – HH52,
- Thank the respondent for his/her cooperation and then
- Proceed with the administration of the remaining individual questionnaire(s) in this household.

If there is no individual questionnaire and no WATER QUALITY TESTING QUESTIONNAIRE to be completed in this household thank the respondent for his/her cooperation and move to the next household you have been assigned by your supervisor.

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS